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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br>(Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No. <b>9475/0M772USO</b> |                                  |
|  | First Inventor                           | <b>Kazunori Yamada</b>           |
|  | Title                                    | <b>DOUBLE ACTION PUSH SWITCH</b> |
|  | Express Mail Label No.                   |                                  |

|   |   |
|---|---|
| <b>APPLICATION ELEMENTS</b><br><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b><br>MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |
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|   |  |
|---|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original, and a duplicate for fee processing)   | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)   |
| 2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.   | 8. Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary)  |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages <b>34</b> ]<br>(preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table,<br/>or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> | a. <input type="checkbox"/> Computer Readable Form (CRF)   |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>19</b> ]   | b. Specification Sequence Listing on: <ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul> |
| 5. Oath or Declaration [Total Sheets <b>3</b> ] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br/>(for continuation/divisional with Box 18 completed)<ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/>Signed statement attached deleting<br/>inventor(s) named in the prior application,<br/>see 37 CFR 1.63(d)(2) and 1.33(b).</li></ul></li></ul>   | c. <input type="checkbox"/> Statements verifying identity of above copies  |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76  |  |

**ACCOMPANYING APPLICATIONS PARTS**


- |  |  |
|--|--|
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))   |  |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement<br>(when there is an assignee)   | <input type="checkbox"/> Power of<br>Attorney  |
| 11. <input type="checkbox"/> English Translation Document (if applicable)  |  |
| 12. <input type="checkbox"/> Information Disclosure<br>Statement (IDS)/PTO-1449  | <input type="checkbox"/> Copies of IDS<br>Citations  |
| 13. <input type="checkbox"/> Preliminary Amendment   |  |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)                                  |  |
| 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)                               |  |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent. |  |
| 17. <input checked="" type="checkbox"/> Other:   | Certificate of Express Mailing Under 37 CFR<br>1.10; Check in the amount of \$790.00;<br>Return Postcard |

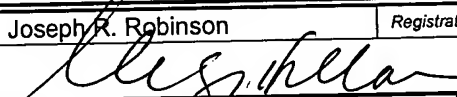
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

|   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | <br>* 0 7 2 7 8 * | or <input checked="" type="checkbox"/> Correspondence address below |
| Name  | <b>DARBY &amp; DARBY P.C.<br/>Joseph R. Robinson</b>   |   |
| Address   | <b>P.O. Box 5257</b>   |   |
| City  | <b>New York</b>  | State <b>NY</b> Zip Code <b>10150-5257</b>                          |
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|                   |   |                                   |                     |
|-------------------|---|-----------------------------------|---------------------|
| Name (Print/Type) | <b>Joseph R. Robinson</b>   | Registration No. (Attorney/Agent) | <b>33,448</b>       |
| Signature         | <br><b>MARIE GILFILLAN</b> | Date                              | <b>July 1, 2003</b> |

**EV340064926-US****7/1/03**

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17271 U.S. PTO  
10/612038  
07/01/03

13142 U.S. PTO  
07/01/03

PTO/SB/17 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032  
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| <h1>FEE TRANSMITTAL</h1> <h2>for FY 2003</h2> <p>Effective 01/01/2003, Patent fees are subject to annual revision.</p> |  | <b>Compl t if Known</b> |                       |
|  |  | Application Number      | Not Yet Assigned      |
|  |  | Filing Date             | Concurrently Herewith |
|  |  | First Named Inventor    | Kazunori Yamada       |
|  |  | Examiner Name           | Not Yet Assigned      |
|  |  | Art Unit                | N/A                   |
|  |  | Attorney Docket No.     | 9475/0M772US0         |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  |                         |                       |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 790.00   |  |                         |                       |

| <b>METHOD OF PAYMENT (check all that apply)</b><br><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input type="checkbox"/> Deposit Account<br>Deposit Account Number: 04-0100<br>Deposit Account Name: Darby & Darby P.C.<br>The Director is hereby authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.   |              | <b>FEE CALCULATION (continued)</b>   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
|---|--------------|--|--------------|-----------------|----------|----------|----------|---|------|----------|----------|--------------------|--------|--------------------|----------|-------------------|--|--------------|--------------|------------------|----------|----------|----------|--------------------|--|----------|---------|------------------------|--|---------------------|---------|-----------------------------------|--------|---|----------|---------------------------------------|--------------|-----------------|----------|--|----------|---------|--------|--|---------|-------------------------------------|--|---------|---------|--|--|----------|----------|---------------------------|--|------------|------------|---|--|-----------|-----------|--|--|-------------|-------------|---|--|----------|---------|--|--|----------|----------|---|--|----------|----------|--|--|------------|----------|---|--|------------|----------|--|--|----------|----------|------------------|--|----------|----------|--|--|----------|----------|--------------------------|--|------------|------------|---|--|----------|---------|----------------------------------|--|------------|----------|------------------------------------|--|------------|----------|--------------------------------|--|----------|----------|------------------|--|----------|----------|-----------------|--|----------|----------|-------------------------------|--|---------|---------|-------------------------------------|--|----------|----------|---|--|---------|---------|--|-------|----------|----------|---|--|----------|----------|---|--|----------|----------|---|--|----------|----------|---|--|---------------------|--|--|--|---------------------|--|--|-------|
| <b>1. BASIC FILING FEE</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee Code</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1001 750</td> <td>2001 375</td> <td>Utility filing fee</td> <td>750.00</td> </tr> <tr> <td>1002 330</td> <td>2002 165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003 520</td> <td>2003 260</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004 750</td> <td>2004 375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005 160</td> <td>2005 80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3"><b>SUBTOTAL (1)</b></td> <td>750.00</td> </tr> </tbody> </table>   |              | Large Entity   | Small Entity | Fee Description | Fee Paid | Fee Code | Fee Code |   |      | 1001 750 | 2001 375 | Utility filing fee | 750.00 | 1002 330           | 2002 165 | Design filing fee |  | 1003 520     | 2003 260     | Plant filing fee |          | 1004 750 | 2004 375 | Reissue filing fee |  | 1005 160 | 2005 80 | Provisional filing fee |  | <b>SUBTOTAL (1)</b> |         |                                   | 750.00 | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee Code</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1051 130</td> <td>2051 65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1052 50</td> <td>2052 25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1053 130</td> <td>1053 130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812 2,520</td> <td>1812 2,520</td> <td>For filing a request for ex parte reexamination</td> <td></td> </tr> <tr> <td>1804 920*</td> <td>1804 920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805 1,840*</td> <td>1805 1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1251 110</td> <td>2251 55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252 410</td> <td>2252 205</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253 930</td> <td>2253 465</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254 1,450</td> <td>2254 725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255 1,970</td> <td>2255 985</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401 320</td> <td>2401 160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402 320</td> <td>2402 160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403 280</td> <td>2403 140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451 1,510</td> <td>1451 1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452 110</td> <td>2452 55</td> <td>Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>1453 1,300</td> <td>2453 650</td> <td>Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>1501 1,300</td> <td>2501 650</td> <td>Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>1502 470</td> <td>2502 235</td> <td>Design issue fee</td> <td></td> </tr> <tr> <td>1503 630</td> <td>2503 315</td> <td>Plant issue fee</td> <td></td> </tr> <tr> <td>1460 130</td> <td>1460 130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807 50</td> <td>1807 50</td> <td>Processing fee under 37 CFR 1.17(q)</td> <td></td> </tr> <tr> <td>1806 180</td> <td>1806 180</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>8021 40</td> <td>8021 40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td>40.00</td> </tr> <tr> <td>1809 750</td> <td>2809 375</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>1810 750</td> <td>2810 375</td> <td>For each additional invention to be examined (37CFR 1.129(b))</td> <td></td> </tr> <tr> <td>1801 750</td> <td>2801 375</td> <td>Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>1802 900</td> <td>1802 900</td> <td>Request for expedited examination of a design application</td> <td></td> </tr> <tr> <td colspan="3">Other fee (specify)</td> <td></td> </tr> <tr> <td colspan="3"><b>SUBTOTAL (3)</b></td> <td>40.00</td> </tr> </tbody> </table> |          | Large Entity                          | Small Entity | Fee Description | Fee Paid | Fee Code   | Fee Code |         |        | 1051 130   | 2051 65 | Surcharge - late filing fee or oath |  | 1052 50 | 2052 25 | Surcharge - late provisional filing fee or cover sheet           |  | 1053 130 | 1053 130 | Non-English specification |  | 1812 2,520 | 1812 2,520 | For filing a request for ex parte reexamination |  | 1804 920* | 1804 920* | Requesting publication of SIR prior to Examiner action |  | 1805 1,840* | 1805 1,840* | Requesting publication of SIR after Examiner action |  | 1251 110 | 2251 55 | Extension for reply within first month |  | 1252 410 | 2252 205 | Extension for reply within second month |  | 1253 930 | 2253 465 | Extension for reply within third month |  | 1254 1,450 | 2254 725 | Extension for reply within fourth month |  | 1255 1,970 | 2255 985 | Extension for reply within fifth month |  | 1401 320 | 2401 160 | Notice of Appeal |  | 1402 320 | 2402 160 | Filing a brief in support of an appeal |  | 1403 280 | 2403 140 | Request for oral hearing |  | 1451 1,510 | 1451 1,510 | Petition to institute a public use proceeding |  | 1452 110 | 2452 55 | Petition to revive - unavoidable |  | 1453 1,300 | 2453 650 | Petition to revive - unintentional |  | 1501 1,300 | 2501 650 | Utility issue fee (or reissue) |  | 1502 470 | 2502 235 | Design issue fee |  | 1503 630 | 2503 315 | Plant issue fee |  | 1460 130 | 1460 130 | Petitions to the Commissioner |  | 1807 50 | 1807 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 180 | 1806 180 | Submission of Information Disclosure Stmt |  | 8021 40 | 8021 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 1809 750 | 2809 375 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 750 | 2810 375 | For each additional invention to be examined (37CFR 1.129(b)) |  | 1801 750 | 2801 375 | Request for Continued Examination (RCE) |  | 1802 900 | 1802 900 | Request for expedited examination of a design application |  | Other fee (specify) |  |  |  | <b>SUBTOTAL (3)</b> |  |  | 40.00 |
| Large Entity  | Small Entity | Fee Description  | Fee Paid     |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Fee Code  | Fee Code     |  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1001 750  | 2001 375     | Utility filing fee   | 750.00       |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1002 330  | 2002 165     | Design filing fee  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1003 520  | 2003 260     | Plant filing fee   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1004 750  | 2004 375     | Reissue filing fee   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1005 160  | 2005 80      | Provisional filing fee   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| <b>SUBTOTAL (1)</b>   |              |  | 750.00       |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Large Entity  | Small Entity | Fee Description  | Fee Paid     |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Fee Code  | Fee Code     |  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1051 130  | 2051 65      | Surcharge - late filing fee or oath  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1052 50   | 2052 25      | Surcharge - late provisional filing fee or cover sheet                     |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1053 130  | 1053 130     | Non-English specification  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1812 2,520  | 1812 2,520   | For filing a request for ex parte reexamination                            |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1804 920*   | 1804 920*    | Requesting publication of SIR prior to Examiner action                     |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1805 1,840*   | 1805 1,840*  | Requesting publication of SIR after Examiner action                        |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1251 110  | 2251 55      | Extension for reply within first month                                     |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1252 410  | 2252 205     | Extension for reply within second month                                    |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1253 930  | 2253 465     | Extension for reply within third month                                     |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1254 1,450  | 2254 725     | Extension for reply within fourth month                                    |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1255 1,970  | 2255 985     | Extension for reply within fifth month                                     |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1401 320  | 2401 160     | Notice of Appeal   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1402 320  | 2402 160     | Filing a brief in support of an appeal                                     |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1403 280  | 2403 140     | Request for oral hearing   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1451 1,510  | 1451 1,510   | Petition to institute a public use proceeding                              |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1452 110  | 2452 55      | Petition to revive - unavoidable   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1453 1,300  | 2453 650     | Petition to revive - unintentional   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1501 1,300  | 2501 650     | Utility issue fee (or reissue)   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1502 470  | 2502 235     | Design issue fee   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1503 630  | 2503 315     | Plant issue fee  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1460 130  | 1460 130     | Petitions to the Commissioner  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1807 50   | 1807 50      | Processing fee under 37 CFR 1.17(q)  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1806 180  | 1806 180     | Submission of Information Disclosure Stmt                                  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 8021 40   | 8021 40      | Recording each patent assignment per property (times number of properties) | 40.00        |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1809 750  | 2809 375     | Filing a submission after final rejection (37 CFR 1.129(a))                |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1810 750  | 2810 375     | For each additional invention to be examined (37CFR 1.129(b))              |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1801 750  | 2801 375     | Request for Continued Examination (RCE)                                    |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1802 900  | 1802 900     | Request for expedited examination of a design application                  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Other fee (specify)   |              |  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| <b>SUBTOTAL (3)</b>   |              |  | 40.00        |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>20</td> <td>-20** =</td> <td>x</td> <td>0.00</td> </tr> <tr> <td>2</td> <td>-3** =</td> <td>x</td> <td>0.00</td> </tr> <tr> <td colspan="4">Multiple Dependent</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee Code</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1202 18</td> <td>2202 9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201 84</td> <td>2201 42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203 280</td> <td>2203 140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204 84</td> <td>2204 42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205 18</td> <td>2205 9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="3"><b>SUBTOTAL (2)</b></td> <td>0.00</td> </tr> </tbody> </table> |              | Total Claims   | Extra Claims | Fee from below  | Fee Paid | 20       | -20** =  | x | 0.00 | 2        | -3** =   | x                  | 0.00   | Multiple Dependent |          |                   |  | Large Entity | Small Entity | Fee Description  | Fee Paid | Fee Code | Fee Code |                    |  | 1202 18  | 2202 9  | Claims in excess of 20 |  | 1201 84             | 2201 42 | Independent claims in excess of 3 |        | 1203 280  | 2203 140 | Multiple dependent claim, if not paid |              | 1204 84         | 2204 42  | ** Reissue independent claims over original patent |          | 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent |         | <b>SUBTOTAL (2)</b>                 |  |         | 0.00    | **or number previously paid, if greater; For Reissues, see above |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Total Claims  | Extra Claims | Fee from below   | Fee Paid     |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 20  | -20** =      | x  | 0.00         |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 2   | -3** =       | x  | 0.00         |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Multiple Dependent  |              |  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Large Entity  | Small Entity | Fee Description  | Fee Paid     |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| Fee Code  | Fee Code     |  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1202 18   | 2202 9       | Claims in excess of 20   |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1201 84   | 2201 42      | Independent claims in excess of 3  |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1203 280  | 2203 140     | Multiple dependent claim, if not paid                                      |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1204 84   | 2204 42      | ** Reissue independent claims over original patent                         |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| 1205 18   | 2205 9       | ** Reissue claims in excess of 20 and over original patent                 |              |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |
| <b>SUBTOTAL (2)</b>   |              |  | 0.00         |                 |          |          |          |   |      |          |          |                    |        |                    |          |                   |  |              |              |                  |          |          |          |                    |  |          |         |                        |  |                     |         |                                   |        |   |          |                                       |              |                 |          |  |          |         |        |  |         |                                     |  |         |         |  |  |          |          |                           |  |            |            |   |  |           |           |  |  |             |             |   |  |          |         |  |  |          |          |   |  |          |          |  |  |            |          |   |  |            |          |  |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |                                  |  |            |          |                                    |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |   |  |         |         |  |       |          |          |   |  |          |          |   |  |          |          |   |  |          |          |   |  |                     |  |  |  |                     |  |  |       |

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